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PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

12/20/2004

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)

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	TITLE OF INVENTION: P	ROTECTIVE SPORT HEL	МЕТ	Dayid Morn	ριγ		STR 0109 PUS	8378
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i. C	Change of correspondence FR 1.363). Change of correspond Address form PTO/SB/12 "Fee Address" indicate PTO/SB/47; Rev 03-02 of Number is required.	orrespondence (1) the names of up to 3 registers or agents OR, alternatively,			red patent at		S. Artz	
3	ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE				vill be printed.			
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5. C	Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. Sec 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. Sec 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. Sec 37 CFR 1.27(g)(2).							
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